


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90169 041 ***150.00

DOCUMENT # 841190	
1. Entity Name FRANK W. WINNE & SON, INC.	

Principal Place of Business 4601 BATH ST. BUILDING 81 PHILADELPHIA, PA 19137	Mailing Address 4601 BATH ST. BUILDING 81 PHILADELPHIA, PA 19137
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40083310



2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

04262006 Chg-P CR2E034 (11/05)

4. FEI Number 23-1226240	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRANDENBURG, BOB
 2012 CHICKWOOD ST
 TAMPA, FL 33618

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City _____ **FL** Zip Code _____

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	HUTTON, MARK	
STREET ADDRESS	44 W FRONT ST	
CITY-ST-ZIP	PHILADELPHIA, PA	
TITLE	D	<input type="checkbox"/> Delete
NAME	COATH, J.D. JR.	
STREET ADDRESS	44 N. FRONT ST.	
CITY-ST-ZIP	PHILADELPHIA, PA	
TITLE	ST	<input type="checkbox"/> Delete
NAME	ADELIZZI, ROBERT P.	
STREET ADDRESS	44 N. FRONT ST.	
CITY-ST-ZIP	PHILADELPHIA, PA	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Terzi, Rocco	
STREET ADDRESS	4601 Bath St, Bldg 81	
CITY-ST-ZIP	Phila Pa 19137	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4601 Bath St, Bldg 81	
STREET ADDRESS	Phila Pa 19137	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	4601 Bath St, Bldg 81	
STREET ADDRESS	Phila Pa 19137	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *R P Adelizzi* **4-26-06**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #